

DEC 18, 2006

PTO/SB/92 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Application No. (if known): 10/811,316

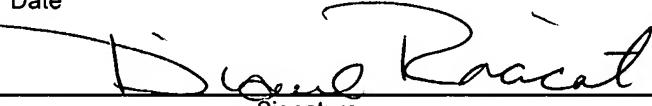
Attorney Docket No.: IRO-009

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Diane Racicot

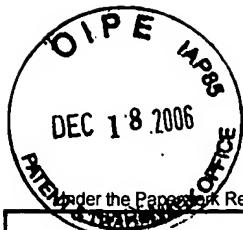
Typed or printed name of person signing Certificate

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Telephone Number

Transmittal Form (1 pg.);
Fee Transmittal (1 pg.);
A check in the amount of \$690.00;
Amendment and Response (15 pgs.);
Second Supplemental Information Disclosure Statement (2 pgs.);
Information Disclosure Statement by Applicant (1 pg.);
Annotated Sheets (4 sheets);
Replacement Sheets (4 sheets);
Petition for Extension of Time (1 pg.); and
Return receipt postcard

LIBA/1750572.1



DEC 18 2006

 PTO/SB/21 (09-06)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | |
|--|------------------------|------------------------|
| | Application Number | 10/811,316-Conf. #9659 |
| | Filing Date | March 26, 2004 |
| | First Named Inventor | Pack |
| | Art Unit | 3654 |
| | Examiner Name | Kim, Sang K. |
| | Attorney Docket Number | IRO-009 |

ENCLOSURES (Check all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Replacement Sheets/ | <input type="checkbox"/> After Allowance Communication to TC |
| <input checked="" type="checkbox"/> Fee Attached | <input checked="" type="checkbox"/> Annotated Sheets | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment and Response | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Return Receipt Postcard |
| <input checked="" type="checkbox"/> Second Supplemental Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) | |
| <input checked="" type="checkbox"/> Information Disclosure Statement by Applicant | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | | Remarks |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---------------------|----------|--------|
| Firm Name | GOODWIN PROCTER LLP | | |
| Signature | | | |
| Printed name | Andrew L. Jagenow | | |
| Date | December 15, 2006 | Reg. No. | 51,842 |



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| | | | |
|---|--|--------------------------|----------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | |
| | | Application Number | 10/811,316 |
| | | Filing Date | March 26, 2004 |
| | | First Named Inventor | Pack |
| | | Examiner Name | Kim, Sang K. |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 3654 |
| TOTAL AMOUNT OF PAYMENT (\\$) 690.00 | | Attorney Docket No. | IRO-009 |

| | | | |
|---|--|---|--|
| METHOD OF PAYMENT (check all that apply) | | | |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | | | |
| <input type="checkbox"/> Deposit Account Deposit Account Number: 07-1700 Deposit Account Name: Goodwin Procter LLP | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | |
| <input type="checkbox"/> Charge fee(s) indicated below | | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | <input checked="" type="checkbox"/> Credit any overpayments | |

| | | | | | | | | |
|---|--------------------|------------------------------|-----------------------------------|---|-------------------------|------------------------------|-----------------------|-------|
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | |
| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | | |
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid (\$) | |
| | Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| | Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| | Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| | Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ | |
| 2. EXCESS CLAIM FEES | | | | | | | | |
| Fee Description | | | | | | | | |
| Each claim over 20 (including Reissues) Fee (\$) 50 Fee (\$) 25 | | | | | | | | |
| Each independent claim over 3 (including Reissues) Fee (\$) 200 Fee (\$) 100 | | | | | | | | |
| Multiple dependent claims Fee (\$) 360 Fee (\$) 180 | | | | | | | | |
| Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20. | | | | Multiple Dependent Claims Fee (\$) Fee Paid (\$) _____ | | | | |
| Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3. | | | | _____ | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = _____ /50 _____ (round up to a whole number) x _____ = _____ | | | | Fees Paid (\$) _____ | | | | |
| 4. OTHER FEE(S) | | | | | | | | |
| Non-English Specification: \$130 fee (no small entity discount) | | | | | | | | |
| Other (e.g., late filing surcharge): 1806 Submission of Information Disclosure Statement Fee (\$) 180.00 | | | | | | | | |
| 1253 Extension for response within third month Fee (\$) 510.00 | | | | | | | | |
| SUBMITTED BY | | | | | | | | |
| Signature | | | Registration No. (Attorney/Agent) | 51,842 | Telephone | (617) 570-1905 | | |
| Name (Print/Type) | Andrew L. Jagenow | | Date | December 15, 2006 | | | | |